

CLAIMS ONLY							Application Number		Filing Date	
							10643576			
							Applicant(s)			
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		*		*	
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1										
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17	1									
18										
19										
20										
21										
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23										
24										
25										
26										
27										
28										
29										
30		1								
31	1									
32		1								
33			1							
34				1						
35					1					
36						1				
37							1			
38								1		
39	1									
40									1	
41										
42										
43										
44										
45										
46										
47										
48										
49										
50										
Total Indep	4									
Total Depend	36									
Total Claims	40									